

**DHHS SMALL, DISADVANTAGED, WOMAN, HUBZone, VETERAN -OWNED  
SMALL BUSINESS SUBCONTRACTING PLAN**

**DATE OF PLAN:** \_\_\_\_\_

CONTRACTOR \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DUNN & BRADSTREET NUMBER: \_\_\_\_\_

SOLICITATION OR CONTRACT NUMBER: \_\_\_\_\_

ITEM/SERVICE (Description):

\_\_\_\_\_

TOTAL CONTRACT AMOUNT:	\$ _____	\$ _____
	Total contract or Base-Year, if options	Option #1 (if applicable)
\$ _____	\$ _____	\$ _____
Option #2 (if applicable)	Option #3 (if applicable)	Option #4 (if applicable)
\$ _____	\$ _____	\$ _____
Option #5 (if applicable)	Option #6 (if applicable)	Option #7 (if applicable)

TOTAL MODIFICATION AMOUNT, IF APPLICABLE \$ \_\_\_\_\_

TOTAL TASK ORDER AMOUNT, IF APPLICABLE \$ \_\_\_\_\_

PERIOD OF CONTRACT PERFORMANCE (Month, Day & Year): \_\_\_\_\_

The following is a suggested model for use when developing subcontracting plans as required by P.L. 95-507 and implemented by Federal Acquisition Regulations (FAR) Subpart 19.7. While this model plan has been designed to be consistent with statutory and regulatory requirements, other formats of a subcontracting plan may be acceptable; however, failure to include the essential information as exemplified in this model may be cause for either a delay in acceptance or the rejection of a bid or offer when a subcontracting plan is required.

Further, the use of this model is not intended to waive other requirements that may be applicable under statute or regulation. "SUBCONTRACT," as used in this clause, means any agreement (other than one involving an employer-employee relationship) entered into by a Federal Government prime contractor or subcontractor calling for supplies or services required for performance of the contract or subcontract.

**1. Type of Plan** (check one)

\_\_\_\_\_ Individual plan (all elements developed specifically for this contract and applicable for the full term of this contract).

\_\_\_\_\_ Master plan (goals developed for this contract) all other elements standardized and approved by a lead agency Federal Official; must be renewed every three years and contractor must provide copy of lead agency approval.

\_\_\_\_\_ Commercial products/service plan, including goals, covers the offerer's fiscal year and applies to the entire production of commercial items or delivery of services sold by either the entire company or a portion thereof (e.g., division, plant, or product line); this includes planned subcontracting for both commercial and Government business.

**2. Goals**

State separate dollar and percentage goals for Small Business (SB), Small Disadvantaged Business (SDB), Woman-owned Small Business (WOSB), Historically Underutilized Business Zone (HUBZone) Small Business, Veteran, and "Other@ than small business (OTHER) as subcontractors, for the base year and each option year, as specified in FAR 19.704 (break out and append option year goals, if applicable) or project annual subcontracting base and goals under commercial plans.

a. Total estimated dollar value of ALL planned subcontracting, i.e., with ALL types of concerns under this contract is \$ \_\_\_\_\_ (b + g = 100%)

b. Total estimated dollar value and percent of planned subcontracting with SMALL BUSINESSES (including SDB, WOB, HUBZone, Veteran, – owned):  
(% of "a") \$ \_\_\_\_\_ and \_\_\_\_\_% Federal Goal 23%

c. Total estimated dollar value and percent of planned subcontracting with SMALL DISADVANTAGED BUSINESSES: (% of "a") \$ \_\_\_\_\_ and \_\_\_\_\_% Federal Goal 5%

d. Total estimated dollar value and percent of planned subcontracting with WOMAN-OWNED SMALL BUSINESSES: (% of "a") \$ \_\_\_\_\_ and \_\_\_\_\_% Federal Goal 5%

e. Total estimated dollar and percent of planned subcontracting with HUBZone SMALL BUSINESSES: (% of "a") \$ \_\_\_\_\_ and \_\_\_\_\_% Federal Goal 2.0%

f. Total estimated dollar and percent of planned subcontracting with VETERAN SMALL BUSINESSES\* (% of "a") \$ \_\_\_\_\_ and \_\_\_\_\_%

g. Total estimated dollar and percent of planned subcontracting with OTHER THAN SMALL BUSINESSES: (% of "a") \$ \_\_\_\_\_ and \_\_\_\_\_%

**\*Note:** Service-disabled veteran goal should be included as part of veteran small business goal.

Subcontracting Plan  
(Rev. October 2000)

Provide a description of ALL the products and/or services, to be subcontracted under this contract, and indicate the size and type of business supplying them (check all that apply).

Product/Service	Other	SB	SDB	WOSB	HUBZoneSB	Veteran

i. Provide a description of the method used to develop the subcontracting goals for small, disadvantaged, woman, HUBZone, veteran, and service-disabled veteran – owned small business concerns. Address efforts made to ensure that maximum practicable subcontracting opportunities have been made available for those concerns and explain the method used to identify potential sources for solicitation purposes. Explain the method and state the quantitative basis (in dollars) used to establish the percentage goals. Also, explain how the areas to be subcontracted to small, disadvantaged, woman, HUBZone, veteran, and service-disabled veteran – owned small business concerns were determined and how the capabilities of these concerns were considered for subcontract opportunities. Identify any source lists or other resources used in the determination process. (Attach additional sheets, if necessary.)

j. Indirect costs have \_\_\_\_ have not \_\_\_\_ been included in the dollar and percentage subcontracting goals above (check one).

k. If indirect costs have been included, explain the method used to determine the proportionate share of such costs to be allocated as subcontracts to small, disadvantaged, woman, HUBZone, veteran, and service-disabled veteran - owned small business concerns.

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### 3. Program Administrator:

NAME/TITLE:

ADDRESS:

TELEPHONE/E-MAIL:

**Duties:** Has general overall responsibility for the company's subcontracting program, i.e., developing, preparing, and executing subcontracting plans and monitoring performance relative to the requirements of those subcontracting plans. Other duties include, but are not limited to, the following activities:

- a. Developing and promoting company-wide policy initiatives that demonstrate the company's support for awarding contracts and subcontracts to small, disadvantaged, woman, HUBZone, veteran, and service-disabled veteran - owned small business concerns; and for assuring that these concerns are included on the source lists for solicitations for products and services they are capable of providing.
- b. Developing and maintaining bidder source lists of small, disadvantaged, woman, HUBZone, veteran, and service-disabled veteran – owned small business concerns from all possible sources;
- c. Ensuring periodic rotation of potential subcontractors on bidder's lists;
- d. Ensuring that requests for contracts (RFC) are designed to permit the maximum practicable participation of small, disadvantaged, woman, HUBZone, veteran, and service-disabled veteran – owned small businesses;
- e. Accessing various sources for the identification of small, small disadvantaged, woman-owned and HUBZone, veteran, and service-disabled veteran – owned small business concerns to include the SBA's PRO-Net System, the Federal Acquisition Computer Network (FACNET) Contractor Registration Database, the National Minority Purchasing Council Vendor Information Service, the Office of Minority Business Data Center in the Department of Commerce, local small business and minority associations, contact with local chambers of commerce and Federal agencies' Small Business Offices;
- f. Establishing and maintaining contract and subcontract award records;
- g. Participating in Business Opportunity Workshops, Minority Business Enterprise Seminars, Trade Fairs, Procurement Conferences, etc;
- h. Ensuring that small, disadvantaged, woman, HUBZone, veteran, and service-disabled veteran - owned small business concerns are made aware of subcontracting opportunities and assisting concerns in preparing responsive bids to the company;
- i. Conducting or arranging for the conduct of training for purchasing personnel regarding the intent and impact of Public Law 95-507 on purchasing;
- j. Monitoring the company's subcontracting program performance and making any adjustments necessary to achieve the subcontract plan goals;
- k. Preparing, and submitting timely, required subcontract reports;
- l. Coordinating the company's activities during the conduct of compliance reviews by Federal agencies; and
- m. Other duties: \_\_\_\_\_

#### **4. Equitable Opportunity**

Describe efforts the offeror will make to ensure that small, disadvantaged, woman, HUBZone, veteran, and service-disabled veteran - owned small business concerns will have an equitable opportunity to compete for subcontracts. These efforts include, but are not limited to, the following activities:

- a. Outreach efforts to obtain sources:
    - 1) Contacting minority and small business trade associations; 2) contacting business development organizations and local chambers of commerce; 3) attending small, disadvantaged, woman, HUBZone, veteran, and service-disabled veteran – owned small business procurement conferences and trade fairs; 4) requesting sources from the Small Business Administrations (SBA) PRO-Net System and other SBA resources; and 5) Conducting market surveys to identify new sources.
  - b. Internal efforts to guide and encourage purchasing personnel:
    - 1) Conducting workshops, seminars, and training programs;
    - 2) Establishing, maintaining, and utilizing small, disadvantaged, woman, HUBZone, veteran and service-disabled veteran – owned small business source lists, guides, and other data for soliciting subcontractors; and
    - 3) Monitoring activities to evaluate compliance with the subcontracting plan.
  - c. Additional efforts:
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## 5. Flow Down Clause

The contractor agrees to include the provisions under FAR 52.219-8, "Utilization of Small Business Concerns," in all acquisitions exceeding the simplified acquisition threshold that offers further subcontracting opportunities. All subcontractors, except small business concerns, that receive subcontracts in excess of \$500,000 (\$1,000,000 for construction) must adopt and comply with a plan similar to the plan required by FAR 52.219-9, "Small Business Subcontracting Plan." (Flow down is not applicable for commercial items/services as described in 52.212-5(e) and 52.244-6(c).)

## 6. Reporting and Cooperation

The contractor gives assurance of (1) cooperation in any studies or surveys that may be required; (2) submission of periodic reports which show compliance with the subcontracting plan; (3) submission of Standard Form (SF) 294, "Subcontracting Report for Individual Contracts," and attendant Optional Form 312, SDB Participation Report and SF-295, "Summary Subcontract Report," in accordance with the instructions on the forms; and (4) ensuring that subcontractors agree to submit Standard Forms 294 and 95.

Reporting Period	Report Due	Due Date
Oct 1 - Mar 31	SF-294/of 312	4/30
Apr 1 - Sept 30	SF-294/of 312	10/30
Oct 1 - Sept 30	SF-295	10/30

Special instructions for commercial products plan: SF295 Report is due on 10/30 each year for the previous fiscal year ending 9/30.

- a. Submit SF-294 and attendant optional Form 312 to cognizant Contracting Officer
- b. Submit SF-295 to cognizant Contracting Officer and to the:

Office of Small and Disadvantaged Business Utilization  
Department of Health and Human Services  
200 Independence Avenue, SW  
Humphrey H. Building, Room 517-D  
Washington, D.C. 20201

- c. Submit "information" copy to SBA Commercial Market Representative (CMR); visit the SBA at <http://www.sba.gov/gc> and click on assistance directory to locate your nearest CMR.

## **7. Record keeping**

The following is a recitation of the types of records the contractor will maintain to demonstrate the procedures adopted to comply with the requirements and goals in the subcontracting plan. These records will include, but not be limited to, the following:

- a. Small, disadvantaged, woman, HUBZone, veteran, and service-disabled veteran – owned small business source lists, guides and other data identifying such vendors;
  - b. Organizations contacted in an attempt to locate small, disadvantaged, and woman, HUBZone, veteran, and service-disabled veteran - owned small business sources;
  - c. On a contract-by-contract basis, records on all subcontract solicitations over \$100,000, which indicate for each solicitation (1) whether small business concerns were solicited, and, if not, why not; (2) whether HUBZone small business concerns were solicited, if not, why not; (3) whether small disadvantage business concerns were solicited, if not, why not; (4) whether woman-owned small business concerns were solicited, and if not, why not; (5) whether veteran or service-disabled veteran-owned small business concerns and (6) the reason for the failure of solicited small, disadvantaged, and woman, HUBZone, veteran, and service-disabled veteran – owned small business concerns to receive the subcontract award;
  - d. Records to support other outreach efforts, e.g., contacts with minority and small business trade associations, attendance at small and minority business procurement conferences and trade fairs;
  - e. Records to support internal guidance and encouragement provided to buyers through (1) workshops, seminars, training programs, incentive awards; and (2) monitoring performance to evaluate compliance with the program and requirements; and
  - f. On a contract-by-contract basis, records to support subcontract award data including the name address, and business type and size of each subcontractor. (This item is not required for company or division-wide commercial products plans.)
  - g. Additional records:
-

**SIGNATURE PAGE**

(Applicable to both Master and Commercial type plans)

**This master or commercial subcontracting plan is submitted by:**

**Contractor:** \_\_\_\_\_

**Contractor Signature:** \_\_\_\_\_

**Typed Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Date Prepared:** \_\_\_\_\_

**And Is Accepted By:**

**Agency:** \_\_\_\_\_

**Contracting Officer Signature:** \_\_\_\_\_

**Typed Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

# DHHS SUBCONTRACTING PLAN REVIEW FORM

**SB No.** (Item 6 on 653) \_\_\_\_\_ **MULTIPLE AWARD** \_\_YES\_\_NO (if yes, identify # of subcontracting plans)\_\_\_\_\_of\_\_\_\_\_

<b>MOD No.</b> (if applicable) _____	<b>1. Solicitation/Contact No:</b> _____	<b>2. Title of Acquisition:</b> _____			
3. Contractor ' s Name:  _____	4. Period of Performance (Base & Options) From _____ To: _____	5. Total Contract Amount (including options) \$ _____  BASE YEAR (If there are options) \$ _____			
6. Option #1 (if applicable) \$ _____	Option #2 (if applicable) \$ _____	Option #3 (if applicable) \$ _____	Option #4 (if applicable) \$ _____		
7. Contracting Officer/Specialist Name, Bldg. Room, Phone, Fax & E-mail:  _____			8. Date Received by SBS for Review:  _____		
<b>PART B - PLAN REQUIREMENTS:</b>		<b>CO</b>	<b>SBS</b>		<b>SBA/PCR</b>
1. Subcontracting Goal Data: a. Total Subcontracting Dollars (b + g) \$ _____		A	U	A	U
b. Total Subcontracting Dollars and Percentage with Small Businesses (including SDB, WOB, HUBZone, Veteran) - [Percentage of 1.a.] \$ _____ and _____ %					
c. Total Subcontracting Dollars and Percentage with Small Disadvantaged Businesses - [Percentage of 1.a.] \$ _____ and _____ %					
d. Total Subcontracting Dollars and Percentage with Woman-owned Small Businesses - [Percentage of 1.a.] \$ _____ and _____ %					
e. Total Subcontracting Dollars and Percentage with HUBZone Small Business concerns - [Percentage of 1.a.] \$ _____ and _____ %					
f. Total Subcontracting Dollars and Percentage with Veteran Small Businesses - [Percentage of 1.a.] \$ _____ and _____ %					
g. Total Subcontracting Dollars and Percentage with "other" than Small Businesses - [Percentage of 1.a.] \$ _____ and _____ %					
2. a. Subcontracting Opportunities (description of all principal products/services to be subcontracted to all types of concerns)					
b. Methodology used to develop goals and identify potential sources (e.g. historical trends, information on technical and competitive bidding, formula for calculating the goals, etc.)					
3. Subcontracting Plan Administrator ' s Name and Duties					
4. Description of efforts to ensure the small, disadvantaged, woman, HUBZone, veteran -owned entities have equitable opportunity to compete or subcontracts					



<b>PART B - PLAN REQUIREMENTS - CONTINUED</b>		<b>CO</b>		<b>SBS</b>		<b>SBA/PCR</b>	
5. Required flow-down clause to be included in prime contractor ' s subcontracts		A	U	A	U	A	U
6. Reports and Records: a. Agreement to submit required reports							
b. Agreement to cooperate in studies, surveys							
<b>PART C - CO DETERMINATION - SBS AND SBA RECOMMENDATION:</b>		<b>CO</b>		<b>SBS</b>		<b>SBA/PCR</b>	
1. The proposed plan meets the requirements of FAR 19.704 and, in accordance with 19.705-4, past performance has been considered when determining acceptability of this plan.		Y	N	Y	N	Y	N
2. The proposed plan requires an additional pre-award review							
COMMENTS: If any elements are determined to be unacceptable, summarize below:							
<div> <div>_____</div> <div>_____</div> <div>CO Signature</div> <div>DATE</div> </div> <div> <div>_____</div> <div>_____</div> <div>SBS Signature</div> <div>DATE</div> </div> <div> <div>_____</div> <div>_____</div> <div>SBA/PCR Signature</div> <div>DATE</div> </div>							

A=ACCEPTABLE U=UNACCEPTABLE

Y= Yes

N= No

**NOTES:**

Contracting Officers are responsible for distribution of award documents in accordance with 19.705-6